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TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Application Number Filing Date Kyle N. Patrick **First Named Inventor** Group Art Unit **Examiner Name**

Total Number of Pages in This Subm	ssion 57 Attorney Docket Number	CA9 2000 0073 UST					
ENCLOSURES (check all that apply)							
X Fee Transmittal Form	X Assignment Papers (for an Application)	After Allowance Communications to Group					
Fee Attached	X Drawing(s) - Formal	Appeal Communication to Board of Appeals and Interferences					
Amendment / Reply	Licensing-related Papers	Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)					
After Final	Petition	Proprietary Information					
Affidavits/declaration(s)	Petition to Convert to a Provisional Application	Status Letter					
Extension of Time Request	Power of Attorney, Revocation Changes of Correspondence Address	Other Enclosure(s) (please Identify below):					
Express Abandonment Request	Terminal Disclaimer	1) Utility Patent Application Transmittal 2) Executed Oath & Declaration 3) Application for United States Letters Patent. 4) Recordation Cover Sheet					
Information Disclosure Statement	Request for Refund						
Certified Copy of Priority Document(s)	CD, Number of CD(s)	5) Return Post Card					
Response to Missing Parts/ Incomplete Application	Remarks						
Response to Missing Parts Under 37 CFR 1.52 or 1.53							
SIGNA	TURE OF APPLICANT, ATTORNEY, OR A	GENT					
or 8501 IBN	onal Business Machines Corporation 1 Drive, Intellectual Property Law Dept.						
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Date 6 NOV 2001							
CERTIFICATE OF MAILING							
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class November 06, 2001							
Mail in an envelope addressed to: Commissioner for Patents, Washington, DC 20231 of this date.							
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FEE TRANSMITTAL for FY 2001

Patent fees are subject to annual revision

Complete if Known					
Application Number					
Filing Date					
First Named Inventor	Kyle N. Patrick				
Examiner Name					
Group Art Unit					
Attorney Docket No.	CA0 2000 0072 US1				

TOTAL AMOUNT OF PAYMENT	\$ 1806.00	Attorney Docket No.		lo. CA9 20	CA9 2000 0073 US1		
METHOD OF PAYMENT		FEE CALCULATION (continued)					
The Commissioner is hereby authorized to Indicated fees and credit any overpayment to Deposit Account 50-0629	o:	3. ADDIT Larg Enti Fee Fee	je S	Small Entity Fee I	Fee Description	Fee Paid	
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Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17 Applicant claims small entity status. See 37 CFR 1.27	14	39 130 47 2,250 12 920		,250 Fo	on-English specification or filing a request for ex pa Requesting publication of SI Examiner action		
2. Payment Enclosed Check Credit card Money Or FEE CALCULATIONS	der Other	13 1,840 15 110 16 390	115	55 Ex	Requesting publication of SI Examiner action xtension for reply within firs xtension for reply within 2 n	st month	
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2. EXTRA CLAIM FEES Extra Claims Fee fro Claims Total Claims 49 -20** = 29 x 18.0 Independent Claims 9 - 3** = 6 x 84.0 Multiple Dependent	om v Fee Paid 00 = 522.00 100 = 504.00	122 130 123 50 126 180 581 40	122 123 126 581	130 P 50 Pr 180 St 40 Ri P 355 Fi	Petition to the Commissione rocessing fee under 37 CFI ubmission of Information D recording each patent assig Property(times number of prilling a submission after fina 37 CFR § 1.129(a))	R 1.117(q) isclosure Stmt inment per roperties) R 1.117(q) 40.00	
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103 18 203 9 Claims in excess of 20 102 80 202 40 Independent claims in e 104 270 204 135 Multiple dependent claim 109 80 209 40 **Reissue independent of Original patent	xcess of 3 m, if not paid claims over	179 710 169 900 Other fee	169	900 F	Request for continued Exan Request for expedited exam Of a design application		
SUBTOTAL (2) \$ 102 ** or number previously paid, if greater; For Reiss		* Reduced	l by Basi	c Filing	Fee Paid SUBTOTA	AL (3) \$ 40.00	

SUBMITTED BY					
Name (Print/Type)	Karl O. Hesse	Registration No. (Attorney/Agent)	25,398	Telephone	(704) 594-8300
Signature	Wan O'Un	ne		Date	6 NOU 2001